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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) HICE, JODY, , ,							
	(b) Address (number and street) PO BOX 586	☐ Check if address changed			d	Candidate's FEC Identification Number     H0GA07125		
	(c) City, State, and ZIP Code						ew Amended	
	MONROE		G	A 306	55	Statement (N		
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate		
	REPUBLICAN PARTY	House			GA	10		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full)  JODY HICE FOR CONGRESS								
	(b) Address (number and street) PO BOX 586							
	(c) City, State, and ZIP Code							
	MONROE				GA	30655		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8.	I hereby authorize the following name candidacy.	ned committee,	which is NC	OT my princi	pal campaign con	nmittee, to receive and ex	pend funds on behalf of my	
	NOTE: This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full) FREEDOM PAC							
	(b) Address (number and street) 824 S MILLEDGE AVE STE 10	01						
	(c) City, State, and ZIP Code							
	ATHENS				GA	30605		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
Si	gnature of Candidate					Date		
Н	ICE, JODY, , ,			[Ele	ctronically Filed]	12/07/2016		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
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FEC FORM 2 (REV. 02/2009)

(c) City, State and ZIP Code

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) HICE FREEDOM FUND (b) Address (number and street) 824 S MILLEDGE AVE STE 101 (c) City, State and ZIP Code **ATHENS** GΑ 30605 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)